Public Opinion Regarding Information on Porcine-Contained Medications

Anindhita Paramita Wibowo,¹ Yoni Fuadah Syukriani,² Teguh Marfen Djajakusumah³

¹Faculty of Medicine Universitas Padjadjaran, ²Department of Forensic and Medicolegal Faculty of Medicine Universitas Padjadjaran/Dr. Hasan Sadikin General Hospital Bandung, ³Department of Surgery Faculty of Medicine Universitas Padjadjaran/Dr. Hasan Sadikin General Hospital Bandung

Abstract

Background: Drugs are biological products, a single or combination of active and additives components. Some additional components are derived from porcine, a substance that is haraam for Muslims. Patient's rights, such as medication information, are substantial in decision-making process. Medical decision-making in the Eastern culture is not only the patient's affair, but also family's interest. This study aimed to determine the public opinion on that matter.

Methods: This study was conducted in October–November 2014 using qualitative methods. Data collection was performed in the District of Jatinangor, Sumedang Regency by using the purposive sampling method. Six respondents were selected. Data were collected through in-depth interview techniques and were analyzed using content analysis technique.

Results: There were 3 main responses regarding the respondent's opinions. First, respondents showed several attitudes toward drugs in general and also several attitudes toward porcine-contained drugs. Respondents showed concern for the medications used and wished either to be informed or not about the prohibited substance in the drugs. The decision-making process of respondents was performed by each individual or family, with the guidance of religious scholars. In a doctor-patient relationship, the doctors should be more active in providing information on the medications and the opportunity for patients to choose drugs. Respondents also had a high dependency to the physicians in making medical decisions.

Conclusions: Public opinion on patient's rights regarding porcine-contained drugs shows the people's attitude towards drugs in general and porcine-contained drugs in particular, the decision-making process and the relationship between physicians and patients.

Keywords: Patient's rights, drug information, public opinion, porcine

Introduction

Drugs are biological products, whether in a single or combination form of several active ingredients and other supplementary materials that function to support the effects of the drug.¹ Some drugs have additional ingredients derived from porcine.² On the other hand, Indonesia is the largest Muslim country in the world with a total of Muslim population of about 87% of the overall population.² Muslims are prohibited from consuming products derived from porcine, as stated in the Quran.³

Religion is one of the basic human rights. Mentioning about human rights, the right

of health is also included.4 It consists of the right to healthcare and the right to selfdetermination.⁵ Patient's rights of autonomy are the construct of the right to selfdetermination, including the right of complete explanations of the medical measures that will be undertaken and the right to decide what kind of treatment will be performed, and also the information about the medicine.⁵ The patient's medication information would affect the treatment decision-making process. because information is an important weapon in the process.⁶ A medical decision, in Eastern cultures, is not only according to patients' preferences, but also a common interest of the whole family.7

Correspondence: Anindhita Paramita Wibowo, Faculty of Medicine, Universitas Padjadjaran, Jalan Raya Bandung-Sumedang Km.21, Jatinangor, Sumedang, Indonesia, Email: anindhitaparamita@gmail.com

Based on the explanation above, a study was conducted to determine the public opinions on patient's rights regarding the information of porcine-contained medications.

Methods

The study was conducted in October to November 2014 in the District of Jatinangor, West Java, Indonesia using qualitative methods. The study population was the people who lived in the District of Jatinangor. Sampling was performed using the purposive sampling technique based on the information's degree of saturation. The selected respondents consisted of six people. Those who were willing to participate in the study were 17 years old and above, had a minimum of elementary education, were Muslims, were able to communicate well and had adequate language skills.

Data were collected through in-depth interview using semi-structured technique. Observation of the respondents was needed so that the interview and results would be understood in its context. The average duration of the interviews took 15-30 minutes and it was carried out in Bahasa Indonesia. The interview guide referred to a list of questions prepared according to the Four Box Method, with the advices from assisting researchers. The Four Box Method is a framework made to guide physicians to be able to decide on cases involving ethical issues.7

The topics of interview centered on: 1) The knowledge of information about the drugs in used 2) The attitude of respondents towards porcine-contained drugs 3) Matters relating to medical decision-making process.

The voice recordings of the interviews transcribed into verbatim using Bahasa Indonesia. Content analysis was then performed on the transcript by the primary researcher and assisting researcher as peerreview. Afterwards, the data reduction was performed, then the withdrawal of pattern in the form of coding was conducted, and lastly, the data were divided into several categories.

Prior to the interview, the respondents were given a brief explanation of the interview objective, topic of discussion, confidentiality of information and right to refuse to participate in the research. The respondents realized that the interview process was recorded and may refuse to be recorded if not pleased. Ethical approval was attained from the Health Research Ethics Committee of Faculty of Medicine Universitas Padiadiaran and Dr. Hasan Sadikin General Hospital Bandung. During the presentation of the data, the personal data of the respondents remain anonymous.

Results

According to the information given by the respondents, some important things could be drawn.

Based on the interviews, the attitude of the respondents towards drugs in general, it revealed that the respondents were concerned about the drugs they were using, including the effects, content, and side effects of the drugs. These answers were attained from the respondents who were pregnant.

'Kalo dikasih obat baru, apalagi lagi hamil kalo dikasih obat baru sama bidannya aku teh langsung buka Google kan, bener ga sih, ya namanya dokter kan sama sama manusia kan, sampe ke isi kandungannya, jadi suka nyari sendiri." (Responden 1)

"If I were given a new drug by the midwife, especially when I am pregnant, I will straight search the drug through Google, whether it is the right drug or not, as doctors are also l

Table 1 Respondent Characteristics

| | Characteristics | | | _ | |
|------------|-----------------|--------------------|-------------|------------------|-----------------|
| Respondent | Gender | Age (years old) | Education | Occupation | Additional info |
| N | F | 27 | High school | Private employee | Pregnant |
| NA | M | 21 | High school | College student | |
| KP | F | 20 | High school | College student | |
| SD | F | 21 | High school | College student | |
| S | F | 25 | High school | Private employee | Pregnant |
| Y | M | 20 | High school | College student | |

Table 2 Data Analysis Result

| Category | | Coding | | |
|---------------------|--------------------------------|---|--|--|
| | | Concern for the drugs in use, including information about the content because she is pregnant and to be able to treat themselves | | |
| | Toward drugs in general | Not concern for the drugs in use, characterized by directly receiving the drug from the doctors. The information provided are sufficient, as long as the treatment goals are met, the drug information becomes less important | | |
| Attitude | | Prefer alternative drugs | | |
| Attitude | | Willing to use porcine-contained drugs if other alternatives are unavailable and in an emergency situation | | |
| | Toward porcine-contained drugs | Willing to be informed for reasons of respecting one's religion, different perspectives on porcine, preventing physicians to feel guilty about giving the medication, advancing knowledge and patient's right to decide | | |
| | | Unwilling to be informed so that they would not feel guilty | | |
| | | For themselves without interference | | |
| Decision-making p | rocess | Medical decisions is in the hand of the family | | |
| | | Consult to religion scholars | | |
| | | Expectations for the doctors to be able to be more actively informed about porcine-contained drugs and other treatment information to the patients | | |
| Doctor-patient rela | ationship | Lack of choices of drugs and the opportunity to choose it independently | | |
| | | Patient's trust in doctors is high, the assumption is that the physician are experts | | |

human, right? I will search the content also, by myself." (Respondent 1)

However, there were also respondents who were not concern about the content of the drug in use.

"Ga pernah baca baca komposisinya, ga pernah mau tau apa itu obatnya, langsung minum aja." (Responden 2)

"I never read the compositions, and never want to know what drug it is either, I just drink it directly." (Respondent 2)

The attitude of the respondents to porcinecontained drugs, respondents preferred using alternative medicines than porcine-contained drugs because of religious prohibitions. Respondents were also willing to use porcinecontained drugs if there were no other alternatives.

"Pertimbangan saya yah kalo misalnya saya kan beragama islam sesuai pandangan agama seperti itu pasti ya kalo misalnya tidak ada jalan alternatif lain ya sah sah saja, tetapi ketika ada obat herbal atau seperti apa yang dapat menyembuhkan, kenapa tidak menggunakan obat herbal terlebih dahulu." (Responden 6)

"My consideration is my religion, Islam, if there is no alternative, than it is legitimate

to be consumed, but when there are herbal medicines or anything else available that can cure, why do not use that first." (Repondents 6)

Respondents wished to be informed about the content of porcine in the drug for the following reasons; respecting one's religion, different perspectives on porcine, so doctors would not feel guilty for giving the medications, to advance the patient's knowledge, and the patient's right to know and to choose whether to use the drug or not.

"Seharusnya dikasih tau, supaya banyak pengetahuan, kalo dokternya sempet mah buat ngejelasin..." (Responden 5)

"It should be informed, so that we gain more knowledge, if the doctor have more time also to give explanation..." (Respondent 5)

"Sebaiknya dikasih tau soalnya kan beberapa pandangan orang kan ada yang berbeda beda jadi usahakan untuk tranparanlah terbuka obat ini tuh mengandung apa apa apa biar masyarakat tuh tau ternyata yang dilihat tuh bukan dari hanya pandangan sebelah mata tapi bisa menyembuhkan juga." (Responden 6)

"It should inform because of the people's different perspectives, try to keep the transparency of all the content of the drugs so

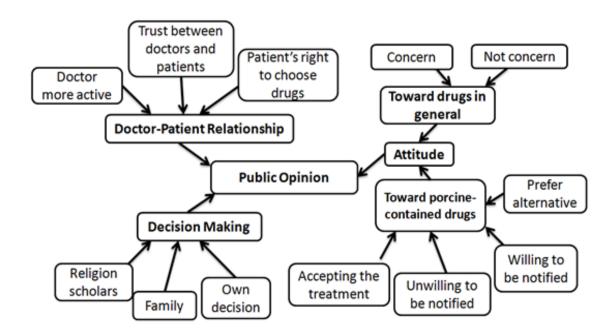


Figure 1 Scheme of Research Result

that the society would not judge and so they

would also benefit for curing." (Respondent 6) "Dikasih tau, karna itu hak pasien buat memutuskan, takutnya kalo pasien tau diluar, kan kita gatau dari kalangan mana, tingkat ilmunya sampe mana, mereka kan bisa aja nuntut dokternya, misalnya mereka cuman tau kegunaannya, yang mereka tau kan babi dan hal-hal buruknya." (Responden 4)

"It should be informed because it is the patient's right to decide, we would not want the patient to misunderstand about the porcine itself and eventually, they would sue the doctor for not being truthful." (Respondent

"Ya kalo ga dikasih tau takutnya dokternya yang merasa berdosa mungkin, sebenernya ya tergantung masing masing, cuman kasih tau mah ya kasih tau aja, soalnya itu kan pilihan si orangnya kalo misalkan ga dikasih tau juga ya gapapa." (Responden 2)

'If it was not informed, the doctor might feel guilty, depending on each person because it was their decision, but I think they should be

informed." (Respondent 2)

'Sebenernya mungkin lébih baik dikasih tau, soalnya kan ada beberapa orang yang saklek dengan agamanya, mungkin buat ngeharaain agamanya juga, ya lebih baik dikasih tau juga..." (Responden 3)

"Actually, it is best to be informed, also to

respect their religion, there may be people who are very strict in their religion." (Respondent

Respondents would not wish to know the content of porcine-contained drugs, so that respondents would not feel guilty to use the

^{*}Karena biar ga merasa bersalah aja, yang penting sembuh alhamdulillah, soalnya kalo dikasih tau kan mikir aduh minum ga yah, kalo ga minum ga sembuh, kalo minum ya merasa bersalah sedikit, ya jadi mending gatau jadi minum aja." (Responden 3)

"So I would not feel guilty about it, if it cured me alhamdulillah, because if I was informed about the porcine, I would have hesitated to use the drugs." (Respondent 3)

The decision making process of the respondents, respondents gave the responsibility of a dilemmatic treatment decision to the family.

ʻ...dirundingkan dulu gitu, walaupun udah tau ada babinya haram, tapi kalo kondisi nya urgent bener bener butuh. Pokonya konsultasi dulu dirundingkan dulu." (Responden 1)
"I would discuss it first, although we already

knew about the existence of the porcine, I would consult this matter first." (Respondent

Respondents chose to decide for themselves regarding the dilemmatic treatment was for the respondent's own interests.

"Kalo buat hal itu kayanya mutusin diri sendiri aja karena kalo nanya orang apalagi kalo soal masalah babi ini pasti pendapatnya beda beda banget gitu." (Responden 3)
"In this case, I would decide it by myself

because people's opinions are various."

(Respondent 3)

Respondents also stated the need to incorporate their own decision with the family decision.

"Intinya kalo saya sih orgnya menyatukan dulu kesimpulan mana yang baik mana yang benar dan percaya sama keluarga juga.' (Responden 6)

"I am the kind of person who combines what is good and what is right, and I also trust

the family." (Respondent 6)

Respondents would consult the usage of porcine-contained drugs with the religion scholars.

"Nanya nanya sih ke ustad, atau cari referensi

dari jaman Ibnu Sina..." (Responden 4)

"I would ask the ustadz, or look for references from the Avicena era." (Respondent

doctor-patient relationship. respondents wished the physician to be more active in providing information on the porcinecontained drugs.

"Harusnya dikasih tau obat apa, gunanya buat apa, kan kalo praktek dokter katanya ngasih obat paten, jadi kan mahal, jadi lebih baik mungkin tawarin yang generiknya yang lebih murah, terus efek samping, sama cara

minum." (Responden 3)

"The doctor should inform us about the drug and its functions. In a therapeutic practice, doctors usually give patent drugs that are expensive. Maybe it is best to offer generic drugs, the cheaper ones, and inform also about the side effects and instructions of use." (Respondent 3)

Respondents also stated that the doctor rarely gave choices when prescribing drugs.

'Jarang ada yang memberi pilihan saat meresepkan, tapi pernah kayanya tp lupa." (Responden 4)

When prescribing drugs, doctors seldom give us the opportunity to choose the drugs, however, it happened once I guess, but I forgot it." (Respondent 4)

Respondents entrusted entirely their treatment to the physician because physicians were considered to be the expert.

"Dokternya langsung tulis sendiri kan karena aku engga ngerti, kan dia dokter dia *lebih pinter...*" (Reponden 1)

"The doctor prescribed the drugs without asking anything because I would not understand anything; he is the doctor, must be smarter than I am." (Respondent 1)

Discussion

The respondents' attitude toward drugs in general, including on information about the content of the drugs were divided into two. Respondents who are concerned of the drugs they have been using usually browse for information about the drug via internet, according to the findings of Gavgani et al.8 While, respondents who are not concerned about information of the drugs are influenced by the lack of awareness about the importance to obtain full information about treatment. This situation might be due to the lack of understanding about the rights of patients as stated in a study by Kagoya et al.9 Lack of information can influence the health-seeking behavior of the patients, it can be seen from the statement of the respondents regarding the patients habits of self-treatment.9

Speaking of porcine-contained drugs, respondents recognized that the use of porcine in food and medicine are prohibited by their religion. Easterbrook et al.3 stated that the use of porcine is allowed for Muslims in term of the other alternatives are unavailable and in an emergency situation. According to Easterbrook et al.³, religions and beliefs could influence one's decision making. In addition, the respondents also had the desire to be informed or not about the porcine content in the drug. This is one's own right as a patient, according to Entwistle et al. 10 and Truog. 11

Respondents chose to decide for themselves whether they would use the porcine-contained drugs or not. On the other hand, there were respondents who submitted to the family's decision, which is similar with the findings of Letendre et al.7 In contrast to Schumann et al.12 findings, family factors have no impact on the respondent's decision to use porcinecontained drugs, even though, Schumann et al.¹² stated that family, religion and culture can influence the patient's medical decision making.

Furthermore, the experience of the respondents showed that physicians act less actively in helping patients to implement the rights as a patient, such as in the findings of Kagoya et al.⁹ The rights of patients in this case were the information on drugs. The respondents were only concerned about the ability of the drugs to cure their disease.

The right of information is crucial for the implementation of informed consent. Moreover, Hamammi et al.13 stated that informed consent has a very important role in the medical decision-making process of the patients. According to Hargianti Dini Iswandari⁵, in a therapeutic relationship between doctor-patient, informed consent serves to protect the patients and the physicians.

From the interviews, it appeared that the patient's trust in physicians remained high because the physicians were considered as the expertise. This relationship is called the paternalistic relationship. Nevertheless, Truog¹¹ mentions that the relationship between doctor and patient in this current era should be shared-decision making relationship. 11 The limitation of this study is the limited research and observation time.

The conclusion of this study is the public opinion about the patient's rights regarding porcine-contained information the on medications includes the public attitudes towards drugs in general, public attitudes towards porcine-contained drugs, the doctorpatient relationship, and one's decisionmaking process.

References

- 1. Badan Pengawas Obat dan Makanan. Peraturan kepala badan pengawas obat dan makanan Republik Indonesia No. HK.00.05.1.23.3516 tentang izin edar produk obat, obat tradisional, kosmetik, suplemen makanan dan makanan yang bersumber, mengandung, dari bahan tertentu dan atau mengandung alkohol. Jakarta: BPOM;2009.
- 2. Badan Pusat Statistik. Sensus penduduk 2010-penduduk menurut wilayah dan agama yang dianut. Jakarta: BPS;2010.
- Easterbrook C, Maddern G. Porcine and bovine surgical products: jewish, muslim, and hindu perspectives. Arch Surg. 2008;143(4):366-70.

- 4. Hargianti Dini Iswandari. Aspek hukum penyelenggaraan praktik kedokteran: suatu tinjauan berdasarkan undangundang No. 9/2004 tentang praktik kedokteran. Jurnal Manajemen Pelayanan Kesehatan. 2006;9(2):52-7.
- SM, MA. 5. Turpin Marais Decisionmaking: theory and practice. OriON. 2004;20(2):143-60.
- 6. Letendre MC, Tham LCJ. Family and healthcare decision making: implications for bioethics in China. Stud Bioethica. 2011;4(3):25-33.
- 7. Sokol DK. The "four quadrants" approach to clinical ethics case analysis; an application and review. J Med Ethics. 2008;34(7):513-
- 8. Gavgani VZ, Qeisari E, Jafarabadi MA. Health information seeking behavior (HISB): a study of a developing country. Library Philosophy and Practice [e-journal] 2013 [cited 2014 December 17]. Available http://digitalcommons.unl.edu/ from: libphilprac/902.
- 9. Kagoya HR, Kibuule D, Mitonga KH, Ekirapa-Kiracho Ε, Ssempebwa Awareness of responsiveness to and practice of patients' rights at Uganda's national referral hospital. Afr J Prm Health Care Fam Med. 2013;5(1):1-7.
- 10. Entwistle, Vikki A, Carter SM, Cribb A, McCaffery K. Supporting patient autonomy: the importance of clinicianpatient relationships. J Gen Intern Med. 2010;25(7):741-5.
- 11. Truog RD. Patients and doctors-the evolution of a relationship. N Engl J Med. 2012;366(7):581-5.
- 12. Schumann JH, Alfandre D. Clinical ethical decision making: the four topics approach. Semin Med Pract, 2008;11(1):36-42.
- 13. Hammami MM, Al-Gaai EA, Al-Jawarneh Y, Amer H, Hammami MB, Eissa A, et al. Patients' perceived purpose of clinical informed consent: Mill's individual autonomy model is preferred. BMC Med Ethics. 2014;15(1):2–12.